

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000172540

**Entity Name:** ASSOCIATION OF RISK MANAGEMENT, LLC

**Current Principal Place of Business:**

1503 SW 113 AVENUE  
PEMBROKE PINES, FL 33025

**Current Mailing Address:**

1503 SW 113 AVENUE  
PEMBROKE PINE, FL 33025 US

**FEI Number:** 47-5428545

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JACK LEVINE, PA  
3050 BISCAYNE BLVD.  
302  
MIAMI, FL 33137 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** JACK LEVINE, CPA

02/23/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SADLER, ROBERT W  
Address 1503 SW 113 AVENUE  
City-State-Zip: PEMBROKE FL 33025

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SADLER, ROBERT W

AMBR

02/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date